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CONFIRMATION NO. 4828

SERIAL NUMBER 10/767,041	FILING OR 371(c) DATE 01/29/2004 RULE	CLASS 414	GROUP ART UNIT 3652	ATTORNEY DOCKET NO. 0343-0036
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/14/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	STATE OR COUNTRY IL	SHEETS DRAWING 5	TOTAL CLAIMS 126	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Allowance <i>Cam [Signature]</i> Examiner's Signature	<i>PLW</i> Initials			

ADDRESS

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TITLE

Heavy duty cart lifter

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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